

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Keller et al.  
Serial No. : 10/789,123 Examiner : Qing Chen  
Filed : February 27, 2004 Group Art Unit : 2191  
For : METHODS AND ARRANGEMENTS FOR ORDERING CHANGES  
IN COMPUTING SYSTEMS

HON. COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria VA 22313-1450

Sir:

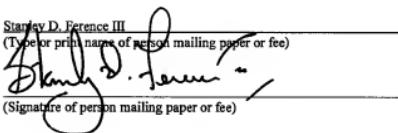
Transmitted herewith is an Amendment in the above-identified application.

- Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.

OR
- In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
- Small Entity status of this application has been established by a verified statement previously submitted.
- A verified statement to establish Small Entity status is enclosed.

CERTIFICATE OF TRANSMISSION

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being transmitted by EFS-WEB on June 20, 2008 to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Stanley D. Ference III  
(Type or print name of person mailing paper or fee)  
  
(Signature of person mailing paper or fee)

ERENCE & ASSOCIATES LLC  
*Amendment Transmittal*

Atty. Docket No. YOR920030547US1  
(590.125)

5.  Also enclosed: \_\_\_\_\_

6.  No additional filing fee is required.

7.  The filing fee has been calculated as shown below:

	Claims Remaining After Amendment (Col. 1)	Highest No. Prev. paid for (Col. 2)	Present Extra (Col. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
Total Claims	40	- **	41	= *	0	x \$25	= 0
Ind. Claims	3	- ***	3	= *	0	x \$105	= 0
<input checked="" type="checkbox"/> Multiple Dependent Claim Presented				+ \$185	= 0	+ \$370	= 0
				<b>TOTAL</b>	= \$ 0	<b>TOTAL</b>	= \$ 0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space

\*\*\* If the "Highest No. Prev. paid for" in this space is less than 3, write "3" in this space.

8.  Applicant encloses herewith a check for \$\_\_ to cover the filing fee.

9.  The Commissioner is hereby authorized to charge the \$\_\_ filing fee to Deposit Account No. 50-0510.

10.  The Commissioner is hereby authorized to charge payment of any additional filing fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510.

Respectfully submitted,

ERENCE & ASSOCIATES LLC

By

Stanley D. Ference III  
Reg. No. 32,879

Dated: June 20, 2008

Mailing Address:

**Customer No. 35195**  
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